

Political Committee  
REPORT OF RECEIPTS AND DISBURSEMENTS  
2010 Judicial Election

Name of Committee Committee to Elect David Beam  
Address P.O. Box 15099, Hattiesburg, MS 39404  
Telephone (601) 264-3519 Fax (601) 264-3642  
Treasurer Richard Topp Email richard@nicholsed.com



☐ Check here if above is different from previous report

## TYPE OF REPORT

- ☐ May 10, 2010 Periodic Report (January 1, 2010, through April 30, 2010).....Mandatory  
☐ June 10, 2010 Periodic Report (May 1, 2010, through May 31, 2010).....Mandatory  
☐ July 9, 2010 Periodic Report (June 1, 2010, through June 30, 2010).....Mandatory  
☐ October 8, 2010 Periodic Report (July 1, 2010, through September 30, 2010).....Mandatory  
☐ October 26, 2010 Pre-Election Report (October 1, 2010, through October 23, 2010).....Mandatory  
☐ November 16, 2010 Pre-Runoff Report (October 24, 2010, through November 13, 2010).....Runoff Candidates  
☒ January 10, 2011 Periodic Report (October 1, 2010, through December 31, 2010).....Mandatory  
☐ Termination Report (Candidate will no longer accept contributions or make campaign expenditures and has no outstanding campaign debt obligation) Required to terminate reporting obligations

## IMPORTANT

- (1) Pre-Election reports are mandatory, even if no contributions or expenditures have occurred. In such case, the candidate shall submit a report indicating "0" (Zero) for total amount of reported contributions and expenditures during this period.  
(2) Until a Candidate files a Termination Report, annual and periodic reports must still be filed in accordance with Miss. Code Ann. § 23-15-807 (b) (ii) and (iii).  
(3) The receiving authority must be in actual receipt of the required reports by 5:00 p.m. on the reporting day. If the deadline falls on a weekend or a holiday, the office must be in actual receipt of the required reports by 5:00 p.m. on the first working day before the deadline. Faxed reports are acceptable.

## REPORTED CONTRIBUTIONS AND DISBURSEMENTS

	Itemized + Non-itemized =	This Period	Calendar Year-To-Date
Total amount of contributions	\$ 5,200.00 + \$ <del>498.00</del> 618.00	\$ 5,818.00	\$ 57,666.99
Total amount of disbursements	\$ 4979.55 + \$ 46.30	\$ 5,025.85	\$ 23,596.28
Total amount of cash on hand		\$ 4,070.71	

I certify that I have examined this report and to the best of my knowledge and belief it is true, accurate, and complete.

Richard A. Topp  
Signature of Director or Treasurer

1-7-2011  
Date

Authority: Refer to Miss. Code Ann. §23-15-801 (1972) et. seq. for statutory requirements.

Penalties: Failure to submit required reports, or failure to submit reports in accordance with statutory deadlines, or failure to submit valid reports shall result in fines of \$50 per day and/or prosecution in accordance with Miss. Code Ann. §§ 23-15-811 and 813 (1972).

SEND TO: 1. Candidates for Statewide, State district, multi-county and all legislative offices should return form to Secretary of State, Elections Division, P. O. Box 138, Jackson, MS 39205 or fax to 601-359-1499 or 601-576-2819.  
2. Candidates for countywide and county district offices should return forms to their county Circuit Clerk.

Name of Candidate or Committee Dawn BerryReporting period 11/14/2010 through 12/31/2010

## ITEMIZED RECEIPTS

A. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan		Date (Mo., Day, Year)	Amount of each receipt this period
<input checked="" type="checkbox"/> Other (please specify) <u>PLLC</u>			
Full name <u>Distard, Howdeshell, Hirted &amp; Hightower PLLC</u>		<u>11/17/10</u>	\$ <u>200.00</u>
Mailing Address <u>Po Drawer 17128</u>		<u>   </u> <u>   </u> <u>   </u>	\$
City, State, Zip Code <u>Hattiesburg MS 39404</u>		<u>   </u> <u>   </u> <u>   </u>	\$
Name of Employer (Required)		<u>   </u> <u>   </u> <u>   </u>	\$
Occupation (Required) <u>Attorneys</u>		Aggregate year-to-date	\$
B. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan		Date (Mo., Day, Year)	Amount of each receipt this period
<input checked="" type="checkbox"/> Other (please specify) <u>PLLC</u>			
Full name <u>Jolly W. Matthews PLLC</u>		<u>11/17/10</u>	\$ <u>500.00</u>
Mailing Address <u>48 Liberty Place, Ste 2</u>		<u>   </u> <u>   </u> <u>   </u>	\$
City, State, Zip Code		<u>   </u> <u>   </u> <u>   </u>	\$
Name of Employer (Required)		<u>   </u> <u>   </u> <u>   </u>	\$
Occupation (Required)		Aggregate year-to-date	\$
C. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan		Date (Mo., Day, Year)	Amount of each receipt this period
<input type="checkbox"/> Other (please specify)			
Full name <u>AL Shizon</u>		<u>11/22/10</u>	\$ <u>200.00</u>
Mailing Address <u>Po Box 310</u>		<u>   </u> <u>   </u> <u>   </u>	\$
City, State, Zip Code <u>Hattiesburg, MS 39402</u>		<u>   </u> <u>   </u> <u>   </u>	\$
Name of Employer (Required)		<u>   </u> <u>   </u> <u>   </u>	\$
Occupation (Required) <u>Attorney</u>		Aggregate year-to-date	\$
D. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan		Date (Mo., Day, Year)	Amount of each receipt this period
<input type="checkbox"/> Other (please specify)			
Full name <u>Joe L Thoms</u>		<u>12/28/10</u>	\$ <u>300.00</u>
Mailing Address <u>165 Redfern Trail</u>		<u>   </u> <u>   </u> <u>   </u>	\$
City, State, Zip Code <u>Petal, MS 39465</u>		<u>   </u> <u>   </u> <u>   </u>	\$
Name of Employer (Required)		<u>   </u> <u>   </u> <u>   </u>	\$
Occupation (Required)		Aggregate year-to-date	\$

Name of Candidate or Committee James BeanReporting period 11/14/2010 through 12/31/2010

## ITEMIZED RECEIPTS

A. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input checked="" type="checkbox"/> Individual <input type="checkbox"/> Loan		Date (Mo., Day, Year)	Amount of each receipt this period
<input type="checkbox"/> Other (please specify) _____			
Full name <u>James Bean</u>		<u>12/3/10</u>	\$ <u>4,000.00</u>
Mailing Address <u>6565 US Highway 98, Ste. 130</u>		<u>  </u> / <u>  </u> / <u>  </u>	\$
City, State, Zip Code <u>Hattiesburg, MS 39402</u>		<u>  </u> / <u>  </u> / <u>  </u>	\$
Name of Employer (Required) <u>James Bean, Attorney at Law</u>		<u>  </u> / <u>  </u> / <u>  </u>	\$
Occupation (Required) <u>Attorney</u>		Aggregate year-to-date	\$ <u>22,000.00</u>
B. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan		Date (Mo., Day, Year)	Amount of each receipt this period
<input type="checkbox"/> Other (please specify) _____			
Full name		<u>  </u> / <u>  </u> / <u>  </u>	\$
Mailing Address		<u>  </u> / <u>  </u> / <u>  </u>	\$
City, State, Zip Code		<u>  </u> / <u>  </u> / <u>  </u>	\$
Name of Employer (Required)		<u>  </u> / <u>  </u> / <u>  </u>	\$
Occupation (Required)		Aggregate year-to-date	\$
C. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan		Date (Mo., Day, Year)	Amount of each receipt this period
<input type="checkbox"/> Other (please specify) _____			
Full name		<u>  </u> / <u>  </u> / <u>  </u>	\$
Mailing Address		<u>  </u> / <u>  </u> / <u>  </u>	\$
City, State, Zip Code		<u>  </u> / <u>  </u> / <u>  </u>	\$
Name of Employer (Required)		<u>  </u> / <u>  </u> / <u>  </u>	\$
Occupation (Required)		Aggregate year-to-date	\$
D. Source: <input type="checkbox"/> Corporation <input type="checkbox"/> PAC <input type="checkbox"/> Individual <input type="checkbox"/> Loan		Date (Mo., Day, Year)	Amount of each receipt this period
<input type="checkbox"/> Other (please specify) _____			
Full name		<u>  </u> / <u>  </u> / <u>  </u>	\$
Mailing Address		<u>  </u> / <u>  </u> / <u>  </u>	\$
City, State, Zip Code		<u>  </u> / <u>  </u> / <u>  </u>	\$
Name of Employer (Required)		<u>  </u> / <u>  </u> / <u>  </u>	\$
Occupation (Required)		Aggregate year-to-date	\$

Name of Candidate or Committee Committee to Elect David BeanReporting period November 14, 2011 through December 31, 2010

## ITEMIZED DISBURSEMENTS

A. Full name <u>Nordan Smith</u>	Date (Mo., Day, Year) <u>11/18/10</u>	Amount of each disbursement this period \$ <u>142.05</u>
Mailing Address <u>PO Box 1937</u>	<u>11/18/10</u>	\$
City, State, Zip Code <u>Hattiesburg MS 39403-1937</u>	<u>11/18/10</u>	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ <u>287.31</u>
B. Full name <u>W M X I</u>	Date (Mo., Day, Year) <u>11/18/10</u>	Amount of each disbursement this period \$ <u>700.00</u>
Mailing Address <u>PO Box 16256</u>	<u>11/18/10</u>	\$
City, State, Zip Code <u>Hattiesburg MS 39404</u>	<u>11/18/10</u>	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ <u>700.00</u>
C. Full name <u>Austin Lovitt</u>	Date (Mo., Day, Year) <u>11/18/10</u>	Amount of each disbursement this period \$ <u>617.50</u>
Mailing Address <u>23 Cave Lane</u>	<u>11/18/10</u>	\$
City, State, Zip Code <u>Hattiesburg MS 39402</u>	<u>12/3/10</u>	\$ <u>520.00</u>
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ <u>2447.50</u>
D. Full name <u>Kirby Biles</u>	Date (Mo., Day, Year) <u>11/24/10</u>	Amount of each disbursement this period \$ <u>3,000.00</u>
Mailing Address <u>2055 Oak Grove Road</u>	<u>11/24/10</u>	\$
City, State, Zip Code <u>Hattiesburg MS 39402</u>	<u>11/24/10</u>	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$ <u>3,000.00</u>
E. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	<u>11/24/10</u>	\$
City, State, Zip Code	<u>11/24/10</u>	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$
F. Full name	Date (Mo., Day, Year)	Amount of each disbursement this period
Mailing Address	<u>11/24/10</u>	\$
City, State, Zip Code	<u>11/24/10</u>	\$
Purpose of Disbursement (Optional)	Aggregate Year-to-date	\$